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35813

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01/06/2006

DESIGN IP-DEPT. MOT
5000 W. TILGHMAN STREET
SUITE 153
ALLENTOWN, PA 18104

03/23/2006 TBESHAHE 00000042 10661755

01 FC:1501
 02 FC:1504

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Jennifer Miller (Depositor's name)
Jennifer Miller (Signature)
 3-22-06 (Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/661,755	09/12/2003	Jeong J. Ma	MOT-CS22547RL	8148

TITLE OF INVENTION: COMMUNICATION HEADSET AND METHOD

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1400	\$300	\$1700	04/06/2006
EXAMINER		ART UNIT	CLASS-SUBCLASS		
TIEU, BENNY QUOC		2642	379-430000		

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

- ☐ Change of correspondence address (or Change of Correspondence Address Form PTO/SB/122) attached.
☒ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.

2. For printing on the patent front page, list

- (1) the names of up to 3 registered patent attorneys or agents OR, alternatively,
 (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

1 Design IP
 2 _____
 3 _____

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

Motorola, Inc.

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

Schaumburg, IL

Please check the appropriate assignee category or categories (will not be printed on the patent): ☐ Individual ☒ Corporation or other private group entity ☐ Government

4a. The following fee(s) are enclosed:

- ☒ Issue Fee
☒ Publication Fee (No small entity discount permitted)
☐ Advance Order - # of Copies _____

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- ☐ A check in the amount of the fee(s) is enclosed.
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☐ The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number _____ (enclose an extra copy of this form).

5. Change in Entity Status (from status indicated above)

☐ a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27.

☐ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

The Director of the USPTO is requested to apply the Issue Fee and Publication Fee (if any) or to re-apply any previously paid issue fee to the application identified above. NOTE: The Issue Fee and Publication Fee (if required) will not be accepted from anyone other than the applicant, a registered attorney or agent, or the assignee or other party in interest as shown by the records of the United States Patent and Trademark Office.

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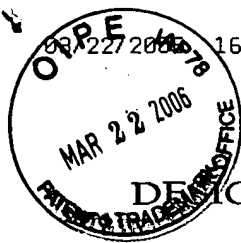
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DESIGN IP

PAGE 01/04



IN THE UNITED STATES PATENT & TRADEMARK OFFICE

FACSIMILE TRANSMITTAL COVER SHEET	Application Number	10/661,755
	Filing Date	September 12, 2003
	First Named Inventor	Jeong J. MA
	TITLE	COMMUNICATION HEADSET AND METHOD
	Art Unit	2642
	Examiner Name	Benny Quoc TIEU
	Attorney Docket Number	MOT-CS22547RL

TO: Issue Fee	Fax Number: 571-273-2885
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ENCLOSURES	
Description	# of pages
Issue Fee Transmittal	1
Credit Card Payment Form	1
"Fee Address" Indication Form	1

Total number of pages in this submission (including this page):	4
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Signature of Applicant, Attorney or Agent	
Name:	Damon A. Neagle, Reg. No. 44,964 phone: 610-395-4900 fax: 610-680-3312
Signature	
Date:	March 22, 2006

Certificate of Transmission/Mailing	
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Typed or printed name:	Jennifer Miller
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Date: March 22, 2006	

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